



COMMUNITY DEVELOPMENT DEPARTMENT
80 Columbia Avenue, Marysville, WA 98270
(360) 363-8100, (360) 651-5099 FAX

Utility Variance Application

DATE: _____

FILE NO: _____

APPLICANT: _____

PHONE: _____

MAILING ADDRESS: _____

DESCRIPTION OF PROPERTY TO BE CONSIDERED (Address, Legal Description or Plat Name):

PROPERTY TAX ID NO: _____

PROPERTY WITHIN:

____ City Limits

____ Utility Service Area/Urban Growth Area (USA/UGA)

____ Utility Local Improvement District (ULID)

____ Coordinated Water System Plan (CWSP)

TYPE OF VARIANCE REQUESTED:

____ Waiver of frontage requirements (MMC 14.03.300)

____ Sewer connection without water connection (MMC 14.01.040)

____ Property located outside USA/UGA/CWSP Boundary (MMC 14.32.010)

____ Other (please specify) _____

MMC 14.32.060(4) - The City Engineer or the City Hearing Examiner is authorized to issue a variance only if it found that literal enforcement of the City codes would cause practical difficulties or unnecessary hardships. **No variance shall be authorized unless the City Engineer or the Hearing Examiner finds that all of the following facts and conditions exist:**

1. That there are exceptional or extraordinary circumstances or conditions applying to the subject property or as to the intended use thereof that do not apply generally to other properties in the same vicinity.
2. That the variance is necessary for the preservation and enjoyment of a substantial property right of the applicant possessed by owners of properties in the same vicinity.
3. That the authorization of the variance will not be materially detrimental to the public interest, welfare or the environment.
4. That the granting of the variance will not be inconsistent with the long-range plans of the City utility system, or jeopardize utility availability for properties within the City limits.

Utility Variance Application
Page 2

- ☐ **Attach 'Instructions for Utility Variance'**
- ☐ **Attach letter addressing the four criteria listed on Page 1.**
- ☐ **Attach supporting documents.**
- ☐ **\$200.00 application fee collected on _____, 20____**

_____ Signature of Applicant	_____ Print Name
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_____ Signature of Owner	_____ Print Name
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It would be advisable that the applicant appear before the City Hearing Examiner for the purpose of presenting this variance application.